PTO/SB/06 (08-03)

Approved for use through 7/31/2006, OMB 0551-0032
U.S. Patent and Tredemark Office; U.S. DEPARTMENT OF COMMERCE

	TENT APPLIC	ATION		RMINATIO			ornauch une	Applicat	on of Doctor Mu	3812	
CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)						SMALL I	ENTITY	OR	OTHER THAN SMALL ENTITY		
FOR NUMBER FILED		NUMBE	NUMBER EXTRA		RATE	FEE		RATE	FEE		
BASIC FEE (37 CFR 1.16(a))							5	OR		s	
TOTAL CLAIMS (37 CFR 1.16(c))		minus 20				x s=		OR	x s=		
INDEPENDENT CLA (37 CFR 1.16(b))	MS	minus 3			1	x s=		OR	x s=		
MULTIPLE DEPEND	ENT CLAIM PRESEI	AL (3	7 CFR 1.16(d))		1	+\$=		QR	+3		
• If the difference in	column 1 is less th	an zero, en	ter "O" in column :	2.	•	TOTAL		OR	TOTAL		
(CLAIMS AS AM	ENDED	– PART II					-			
10-140 Solumn 1) (Column 2) (Column 3)						SMALL I	ENTITY	OR	OTHER THAN SMALL ENTITY		
A TV	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE	
Total (27 CFR 1.18(4) Independent (27 CFR 1.18(4)	123	Minus	~33	*	1	x \$=		OR	X \$=		
independent (37 CFR 1.18(b))	7	Minus	- 3	8	1	x s=		OR	x s=		
FIRST PRESE	1	+s=		OR .	+\$ =						
213.04					•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
7150	(Column 1)		(Column 2)	(Column 3)	_			_			
Total	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE /	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total (37 CFR 1.16(c))	123	Minus	~23	=	/	x s=		OR	x \$=		
(37 CFR 1.18(c)) Independent (37 CFR 1.18(b))	. 3	Minus	" 3	• /		x s=		OR .	X \$=		
FIRST PRESEN	STATION OF MULTIPL	E DEPENDE	NT CLAIM (37 CF	R 1.16(d))		+ \$ =		OR	+8'_=		
						TOTAL ADO'L FEE		OR	ADO'L FEE		
	(Column 1)		(Column 2)	(Column 3)				_			
D LUI	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total (27 CFR L18(4) L10 (27 CFR L18(4) L10 (27 CFR L18(5)	•	Minus	94	•		X 8=		OR	x s=		
Independent (37 CFR 1,16(b))	•	Minus	•••	•		x s=		OR	x s=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+\$=		OR	+ \$=		
	-	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE						
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademerk Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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CLAIM	AS FILED	• • • • • • • • • • • • • • • • • • • •		ann 2)		SKALL E	NTITY	Oβ	OTHE	R THAN.
TOTAL CLAIMS						RATE LEEE				
OR	- Karibi	MATEEN FLED		NUMBER EXTRA			385	OR		
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DEPENDENT CLAIMS		intrus 3 =		•		<u>.</u>	-	OR		┝┷
ULTIPLE DEPENDENT CLA						XB-	 	-IOR	786 -	
Inc. Planes I and		لاسسسا				4145	<u>. · · · · · · · · · · · · · · · · · · ·</u>	OR	4990-	
•		ess than zero, enter "O" in column 2				TOTAL		OR	TOTAL	
9:10:04 CLAIMS A	S AMENDE					SMALL		OR	OTHER SMALL	THAN
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	•	•	•		L	1014		OR	TOTAL	
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• • •						TOTAL		OR	POTOL	
(Cotumn 1		(Calum	n 21	(Column 3)	AC	XDIT. PEE			ACONT: FEE	
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FIRST PRESENTATION OF						XB-	:	OR	×86	
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If the entry in column 1 is tess tha If the "lightest Number Prayipusty	n the entry to colu	nn 2, write '	T in cost	mn J.	_	TOTAL		OR	TOTAL	11717

upplication or Docket Number